

IN THE UNITED STATES BANKRUPTCY COURT FOR THE  
MIDDLE DISTRICT OF TENNESSEE

IN RE:	)		
	)		
ROBERT ROY & LOUIS VANDE WIELE,	)	Case No.	2:15-bk-06199
	)	Chapter	7
Debtor(s).	)		

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**NOTICE OF FILING OF CONVERSION STATEMENTS & SCHEDULES**

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**NOW COMES** the Debtor(s), through counsel, and respectfully notifies this Honorable Court the following statements and schedules:

20 Largest Unsecured Creditors, Summary of Schedules, Schedules A, B, C, D, E, F, G, H, I & J, Statement of Financial Affairs and Means Test.

Respectfully submitted,

**LEFKOVITZ & LEFKOVITZ**

By: */s/ Steven L. Lefkovitz*

Steven L. Lefkovitz, No. 5953

Attorney for the Debtor(s)

618 Church St., #410

Nashville, TN 37219

(615) 256-8300 fax (615) 255-4516

slefkovitz@lefkovitz.com

**CERTIFICATE OF SERVICE**

A copy of the foregoing has been sent to the U.S. Trustee via the Court's ECF filing system.

*/s/ Steven L. Lefkovitz*

**United States Bankruptcy Court**  
**Middle District of Tennessee**

In re **ROBERT GORDON ROY**  
**LOUISE MARIE-THERESE VANDE WIELE**

Debtor(s)

Case No. **2:15-bk-06199**  
Chapter **11**

**LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS**

Following is the list of the debtor's creditors holding the 20 largest unsecured claims. The list is prepared in accordance with Fed. R. Bankr. P. 1007(d) for filing in this chapter 11 [or chapter 9] case. The list does not include (1) persons who come within the definition of "insider" set forth in 11 U.S.C. § 101, or (2) secured creditors unless the value of the collateral is such that the unsecured deficiency places the creditor among the holders of the 20 largest unsecured claims. If a minor child is one of the creditors holding the 20 largest unsecured claims, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

(1) <i>Name of creditor and complete mailing address including zip code</i>	(2) <i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	(3) <i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	(4) <i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	(5) <i>Amount of claim [if secured, also state value of security]</i>
AES LOAN SERVICING PO BOX 2461 HARRISBURG PA 17105	AES LOAN SERVICING PO BOX 2461 HARRISBURG PA 17105			19,767.24
AMAZON ATTN: BANKRUPTCY DEPT PO BOX 965060 ORLANDO, FL 32896	AMAZON ATTN: BANKRUPTCY DEPT PO BOX 965060 ORLANDO, FL 32896			712.24
CARE CREDIT BANKRUPTCY DEPT PO BOX 965061 ORLANDO, FL 32896	CARE CREDIT BANKRUPTCY DEPT PO BOX 965061 ORLANDO, FL 32896			11,000.00
CHASE/SOUTHWEST.COM PO BOX 15298 WILMINGTON DE 19886	CHASE/SOUTHWEST.COM PO BOX 15298 WILMINGTON DE 19886			12,413.95
CITI PO BOX 6500 SIOUX FALLS SD 57117	CITI PO BOX 6500 SIOUX FALLS SD 57117			3,205.35
CITI PO BOX 6500 SIOUX FALLS SD 57117	CITI PO BOX 6500 SIOUX FALLS SD 57117			2,389.63
HOME PROJECTS/WF PO BOX 10475 DES MOINES IA 50306	HOME PROJECTS/WF PO BOX 10475 DES MOINES IA 50306			8,960.12
LASSITER TIDWELL DAVIS 150 4TH AVE NO #1850 NASHVILLE TN 37219	LASSITER TIDWELL DAVIS 150 4TH AVE NO #1850 NASHVILLE TN 37219			15,000.00
ORKIN C/O ROLLINS ACCEPTANCE PO BOX 660285 DALLAS, TX 75266	ORKIN C/O ROLLINS ACCEPTANCE PO BOX 660285 DALLAS, TX 75266			10,000.00
PAYPAL SMART CONNECT PO BOX 960080 ORLANDO FL 32896	PAYPAL SMART CONNECT PO BOX 960080 ORLANDO FL 32896			1,600.00

In re **ROBERT GORDON ROY**  
**LOUISE MARIE-THERESE VANDE WIELE**  
 Debtor(s)

Case No. **2:15-bk-06199**

**LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS**  
 (Continuation Sheet)

(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	<i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	<i>Amount of claim [if secured, also state value of security]</i>

**DECLARATION UNDER PENALTY OF PERJURY  
 ON BEHALF OF A CORPORATION OR PARTNERSHIP**

We, **ROBERT GORDON ROY** and **LOUISE MARIE-THERESE VANDE WIELE**, the debtors in this case, declare under penalty of perjury that we have read the foregoing list and that it is true and correct to the best of our information and belief.

Date **December 18, 2015**

Signature **/s/ ROBERT G. ROY**  
**ROBERT GORDON ROY**  
 Debtor

Date **December 18, 2015**

Signature **/s/ LOUISE VANDE WIELE**  
**LOUISE MARIE-THERESE VANDE WIELE**  
 Joint Debtor

*Penalty for making a false statement or concealing property:* Fine of up to \$500,000 or imprisonment for up to 5 years or both.  
 18 U.S.C. §§ 152 and 3571.



**United States Bankruptcy Court**  
**Middle District of Tennessee**

In re **ROBERT GORDON ROY,  
LOUISE MARIE-THERESE VANDE WIELE**

Debtors

Case No. **2:15-bk-06199**

Chapter **11**

**SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	387,400.00		
B - Personal Property	Yes	4	72,054.62		
C - Property Claimed as Exempt	Yes	2			
D - Creditors Holding Secured Claims	Yes	2		489,546.97	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		155,456.74	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	4		102,948.53	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			17,250.00
J - Current Expenditures of Individual Debtor(s)	Yes	2			14,074.65
Total Number of Sheets of ALL Schedules		21			
Total Assets			459,454.62		
Total Liabilities				747,952.24	



**United States Bankruptcy Court**  
**Middle District of Tennessee**

In re **ROBERT GORDON ROY,  
LOUISE MARIE-THERESE VANDE WIELE**

Debtors

Case No. **2:15-bk-06199**

Chapter **11**

**STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)**

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

**This information is for statistical purposes only under 28 U.S.C. § 159.**

**Summarize the following types of liabilities, as reported in the Schedules, and total them.**

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	155,456.74
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	155,456.74

**State the following:**

Average Income (from Schedule I, Line 12)	17,250.00
Average Expenses (from Schedule J, Line 22)	14,074.65
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14 )	19,046.27

**State the following:**

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		138,432.97
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	151,532.59	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		3,924.15
4. Total from Schedule F		102,948.53
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		245,305.65

In re ROBERT GORDON ROY  
LOUISE MARIE-THERESE VANDE WIELE  
Debtor(s)

Case No. 2:15-bk-06199

**LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS**  
(Continuation Sheet)

**DECLARATION UNDER PENALTY OF PERJURY  
ON BEHALF OF A CORPORATION OR PARTNERSHIP**

We, ROBERT GORDON ROY and LOUISE MARIE-THERESE VANDE WIELE, the debtors in this case, declare under penalty of perjury that we have read the foregoing list and that it is true and correct to the best of our information and belief.

Date December 16, 2015

Signature /s/ ROBERT G. ROY  
ROBERT GORDON ROY  
Debtor

Date December 16, 2015

Signature /s/ LOUISE VANDER WIELE  
LOUISE MARIE-THERESE VANDE WIELE  
Joint Debtor

*Penalty for making a false statement or concealing property:* Fine of up to \$500,000 or imprisonment for up to 5 years or both.  
18 U.S.C. §§ 152 and 3571.

In re **ROBERT GORDON ROY,  
LOUISE MARIE-THERESE VANDE WIELE**

Case No. **2:15-bk-06199**

Debtors

### SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

**Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
3075 FALCON TR. COOKEVILLE, TN 38506 (House & Lot) MV \$190,700		J	205,700.00	175,730.00
FALCON TR., LOT #23 COOKEVILLE, TN 38506 (adjoining lot) MV \$15,000				
205 NORTH RIVERSIDE DR. CARTHAGE, TN 38506		J	121,200.00	62,900.00
259 DIXON SPRINGS HWY CARTHAGE, TN 37030		J	60,500.00	193,877.00

Tanglewood Medical Center has been dissolved; all interest in this r.e. is now held by the Debtors

Sub-Total > **387,400.00** (Total of this page)

Total > **387,400.00**

0 continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)



In re **ROBERT GORDON ROY,  
LOUISE MARIE-THERESE VANDE WIELE**Case No. **2:15-bk-06199**

Debtors

**SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

**Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1. Cash on hand	X			
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		FIRST FREEDOM BANK- JOINT CHECKING \$0 ALLY BANK- CDs \$413..23 TD BANK- WIFE'S SAVINGS \$198  SALLIE MAE MONEY MARKET ACCOUNT	J   J	611.23   327.39
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video, and computer equipment.		TABLE & CHAIRS-300 REFRIGERATOR-350 DISHWASHER-200 STOVE-300 FREEZER-100 MICROWAVE-25 WASHER & DRYER-250 CHINA-75 SOFA-150 LOFESEAT-50 4 CHAIRS-300 3 TABLES-75 4 LAMPS-50 2 TVs-300 DVD PLAYER- 75 2 COMPUTERS-400 PRINTER-50 2 COMPUTER DESKS-400 BEDROOM 1-400 BEDROOM 2-300 LAWN FURNITURE-50 HOUSEHOLD TOOLS-35  ITEMS IN SHED: GARDENING TOOLS-100 CHRISTMAS DECOR-50 MASON JARS-20 GARDEN CHEMICALS-45 SHELVING-70 DOG SUPPLIES-200	J	4,690.00
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.		2,000 BOOKS-200 400 CDs-500 50 DVDs-100	J	800.00
6. Wearing apparel.		CLOTHES	J	800.00
7. Furs and jewelry.		HEIRLOOM JEWELRY	J	10,000.00
8. Firearms and sports, photographic, and other hobby equipment.	X			

Sub-Total > **17,228.62**  
(Total of this page)

3 continuation sheets attached to the Schedule of Personal Property

In re **ROBERT GORDON ROY,  
LOUISE MARIE-THERESE VANDE WIELE**Case No. 2:15-bk-06199

Debtors

**SCHEDULE B - PERSONAL PROPERTY**  
(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.		<b>TERM LIFE INSURANCE POLICIES</b>	<b>J</b>	<b>0.00</b>
		<b>HARTFORD INSURANCE- ACTIVE CLAIM UP TO \$418,000</b>	<b>J</b>	<b>Unknown</b>
10. Annuities. Itemize and name each issuer.	<b>X</b>			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	<b>X</b>			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		<b>IRA</b>	<b>J</b>	<b>2,164.86</b>
13. Stock and interests in incorporated and unincorporated businesses. Itemize.		<b>TD AMERITRADE PO BOX 2209 OMAHA NE 68103</b>	<b>J</b>	<b>177.14</b>
		<b>BMO 25 SHARES \$177.14</b>		
		<b>TANGLEWOOD MEDICAL CENTER, INC. (business has been administratively dissolved &amp; it is no longer operating)</b>	<b>J</b>	<b>0.00</b>
14. Interests in partnerships or joint ventures. Itemize.	<b>X</b>			
15. Government and corporate bonds and other negotiable and nonnegotiable instruments.	<b>X</b>			
16. Accounts receivable.	<b>X</b>			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	<b>X</b>			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	<b>X</b>			

Sub-Total > **2,342.00**  
(Total of this page)

Sheet 1 of 3 continuation sheets attached  
to the Schedule of Personal Property

In re **ROBERT GORDON ROY,  
LOUISE MARIE-THERESE VANDE WIELE**Case No. **2:15-bk-06199**

Debtors

**SCHEDULE B - PERSONAL PROPERTY**  
(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.		POTENTIAL LEGAL MALPRACTICE CASE AGAINST VOSS LAW FIRM	J	Unknown
		POTENTIAL LAWSUIT AGAINST HARTFORD INSURANCE TO RECOVER INSURANCE PROCEEDS		
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2014 DODGE GRAND CARAVAN	J	18,000.00
		2014 VW PASSAT	J	23,984.00
		2006 VW GLI	J	500.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.		OFFICE EQUIPMENT & MACHINERY	J	10,000.00
29. Machinery, fixtures, equipment, and supplies used in business.	X			
Sub-Total >				52,484.00
(Total of this page)				

Sheet **2** of **3** continuation sheets attached  
to the Schedule of Personal PropertyCase **2:15-bk-06199** Doc **37** Filed **12/18/15** Entered **12/18/15 16:28:15** Desc **Main**



In re **ROBERT GORDON ROY,  
LOUISE MARIE-THERESE VANDE WIELE**

Case No. **2:15-bk-06199**

Debtors

**SCHEDULE B - PERSONAL PROPERTY**  
(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
30. Inventory.	X			
31. Animals.		<b>60 DOGS</b>	<b>J</b>	<b>0.00</b>
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			

Sub-Total > **0.00**  
(Total of this page)  
Total > **72,054.62**

Sheet **3** of **3** continuation sheets attached  
to the Schedule of Personal Property

In re **ROBERT GORDON ROY,  
LOUISE MARIE-THERESE VANDE WIELE**

Case No. **2:15-bk-06199**

Debtors

## SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:

(Check one box)

☐ 11 U.S.C. §522(b)(2)

☒ 11 U.S.C. §522(b)(3)

☐ Check if debtor claims a homestead exemption that exceeds \$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
<b>Real Property</b>			
3075 FALCON TR. COOKEVILLE, TN 38506 (House & Lot) MV \$190,700	Tenn. Code Ann. § 26-2-301	7,500.00	205,700.00
FALCON TR., LOT #23 COOKEVILLE, TN 38506 (adjoining lot) MV \$15,000			
<b>Checking, Savings, or Other Financial Accounts, Certificates of Deposit</b>			
FIRST FREEDOM BANK- JOINT CHECKING \$0	Tenn. Code Ann. § 26-2-103	611.23	611.23
ALLY BANK- CDs \$413..23			
TD BANK- WIFE'S SAVINGS \$198			
SALLIE MAE MONEY MARKET ACCOUNT	Tenn. Code Ann. § 26-2-103	327.39	327.39
<b>Household Goods and Furnishings</b>			
TABLE & CHAIRS-300 REFRIGERATOR-350 DISHWASHER-200 STOVE-300 FREEZER-100 MICROWAVE-25 WASHER & DRYER-250 CHINA-75 SOFA-150 LOFESAT-50 4 CHAIRS-300 3 TABLES-75 4 LAMPS-50 2 TVs-300 DVD PLAYER-75 2 COMPUTERS-400 PRINTER-50 2 COMPUTER DESKS-400 BEDROOM 1-400 BEDROOM 2-300 LAWN FURNITURE-50 HOUSEHOLD TOOLS-35	Tenn. Code Ann. § 26-2-103	4,690.00	4,690.00
ITEMS IN SHED: GARDENING TOOLS-100 CHRISTMAS DECOR-50 MASON JARS-20 GARDEN CHEMICALS-45 SHELIVING-70 DOG SUPPLIES-200			
<b>Books, Pictures and Other Art Objects; Collectibles</b>			
2,000 BOOKS-200 400 CDs-500 50 DVDs-100	Tenn. Code Ann. § 26-2-103	800.00	800.00
<b>Wearing Apparel</b>			
CLOTHES	Tenn. Code Ann. § 26-2-104	800.00	800.00
<b>Furs and Jewelry</b>			
HEIRLOOM JEWELRY	Tenn. Code Ann. § 26-2-103	10,000.00	10,000.00
<b>Interests in Insurance Policies</b>			
TERM LIFE INSURANCE POLICIES	Tenn. Code Ann. § 56-7-203	0.00	0.00
<b>Interests in IRA, ERISA, Keogh, or Other Pension or Profit Sharing Plans</b>			
IRA	Tenn. Code Ann. § 26-2-111(1)(D)	2,164.86	2,164.86

In re **ROBERT GORDON ROY,  
LOUISE MARIE-THERESE VANDE WIELE**

Case No. **2:15-bk-06199**

Debtors

**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**  
(Continuation Sheet)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
<b><u>Stock and Interests in Businesses</u></b>			
<b>TD AMERITRADE PO BOX 2209 OMAHA NE 68103</b>	<b>Tenn. Code Ann. § 26-2-103</b>	<b>2,700.00</b>	<b>177.14</b>
<b>BMO 25 SHARES \$177.14</b>			
<b><u>Automobiles, Trucks, Trailers, and Other Vehicles</u></b>			
<b>2006 VW GLI</b>	<b>Tenn. Code Ann. § 26-2-103</b>	<b>500.00</b>	<b>500.00</b>
<b><u>Animals</u></b>			
<b>60 DOGS</b>	<b>Tenn. Code Ann. § 26-2-103</b>	<b>0.00</b>	<b>0.00</b>

Total: **30,093.48** **225,770.62**



In re **ROBERT GORDON ROY,  
LOUISE MARIE-THERESE VANDE WIELE**

Case No. **2:15-bk-06199**

Debtors

## SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H U S B A N D  W I F E  J O I N T  C O M M U N I T Y	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xxxxxxxx6476			PMSI LIEN ON VEHICLE					
CAPITAL ONE AUTO FIN 7933 PRESTON RD PLANO TX 75024		J	2014 DODGE GRAND CARAVAN					
			Value \$ 18,000.00				21,055.07	3,055.07
Account No. xxxxxx8693			1ST MORTGAGE 3075 FALCON TR. COOKEVILLE, TN 38506 (House & Lot) MV \$190,700 FALCON TR., LOT #23 COOKEVILLE, TN 38506 (adjoining lot) MV \$15,000					
EMBRACE HOME LOANS PO BOX 8066 VIRGINIA BEACH VA 23450		J						
			Value \$ 205,700.00				175,730.00	0.00
Account No. xxxxxx9105			1ST MORTGAGE 205 NORTH RIVERSIDE DR. CARTHAGE, TN 38506					
EMBRACE HOME LOANS PO BOX 8066 VIRGINIA BEACH VA 23450		J						
			Value \$ 121,200.00				62,900.00	0.00
Account No.			OFFICE EQUIPMENT & MACHINERY					
FIRST FREEDOM BANK PO BOX 100 Lebanon, TN 37087		J						
			Value \$ 10,000.00				12,000.00	2,000.00
Subtotal (Total of this page)							271,685.07	5,055.07

1 continuation sheets attached

In re **ROBERT GORDON ROY,  
LOUISE MARIE-THERESE VANDE WIELE**Case No. **2:15-bk-06199**

Debtors

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E D E B T O R	H W J C	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.			<b>259 DIXON SPRINGS HWY CARTHAGE, TN 37030</b>					
<b>RREF II PEBP ACQUISITIONS, INC. C/O PROCHASKA, JOE ESQ 401 CHURCH ST #2600 NASHVILLE, TN 37219</b>	<b>X</b>	<b>J</b>	<b>Tanglewood Medical Center has been dissolved; all interest in this r.e. is now held by the Debtors</b>	<b>X</b>	<b>X</b>	<b>X</b>	<b>193,877.00</b>	<b>133,377.00</b>
			Value \$ <b>60,500.00</b>					
Account No.			<b>Representing: RREF II PEBP ACQUISITIONS, INC.</b>				<b>Notice Only</b>	
<b>WILLIAMSON CO CHANCERY CT RE: 43063 135 4TH AVE SO #236 FRANKLIN, TN 37064</b>								
			Value \$					
Account No.			<b>PMSI LIEN ON VEHICLE  2014 VW PASSAT</b>					
<b>VOLKSWAGEN CREDIT PO BOX 5215 CAROL STREAM IL 60197</b>		<b>J</b>						
			Value \$ <b>23,984.00</b>				<b>23,984.90</b>	<b>0.90</b>
Account No.								
			Value \$					
Account No.								
			Value \$					
Subtotal (Total of this page)							<b>217,861.90</b>	<b>133,377.90</b>
Total (Report on Summary of Schedules)							<b>489,546.97</b>	<b>138,432.97</b>

Sheet **1** of **1** continuation sheets attached to  
Schedule of Creditors Holding Secured Claims



In re **ROBERT GORDON ROY,  
LOUISE MARIE-THERESE VANDE WIELE**

Case No. **2:15-bk-06199**

Debtors

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

☐ **Domestic support obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$6,150\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,775\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☒ **Taxes and certain other debts owed to governmental units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to maintain the capital of an insured depository institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Claims for death or personal injury while debtor was intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

\* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.



In re **ROBERT GORDON ROY,  
LOUISE MARIE-THERESE VANDE WIELE**Case No. **2:15-bk-06199**

Debtors

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS**  
(Continuation Sheet)**Taxes and Certain Other Debts  
Owed to Governmental Units**

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E D E B T O R	H W J C	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
								AMOUNT ENTITLED TO PRIORITY
Account No.								
IRS CNTRLZD INSOLVENCY OPRTN PO BOX 7346 PHILADELPHIA, PA 19101-7346		J					12,585.59	0.00 12,585.59
Account No. <b>xx-xx8561</b>								
IRS CNTRLZD INSOLVENCY OPRTN PO BOX 7346 PHILADELPHIA, PA 19101-7346	X	J					75,000.00	0.00 75,000.00
Account No.			2014 TAXES					
IRS CNTRLZD INSOLVENCY OPRTN PO BOX 7346 PHILADELPHIA, PA 19101-7346		J					67,871.15	3,924.15 63,947.00
Account No.			NOTICE ONLY					
TN DEPT REVENUE C/O TN ATTY GEN BK UNIT PO BOX 20207 NASHVILLE, TN 37202	X	J		X			0.00	0.00 0.00
Account No.								

Sheet **1** of **1** continuation sheets attached to  
Schedule of Creditors Holding Unsecured Priority ClaimsSubtotal  
(Total of this page) **155,456.74** **3,924.15**  
**151,532.59**Total  
(Report on Summary of Schedules) **155,456.74** **3,924.15**  
**151,532.59**

In re **ROBERT GORDON ROY,  
LOUISE MARIE-THERESE VANDE WIELE**

Case No. **2:15-bk-06199**

Debtors

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>xxxxxx1129</b>  <b>AES LOAN SERVICING</b> <b>PO BOX 2461</b> <b>HARRISBURG PA 17105</b>		<b>J</b>					<b>19,767.24</b>
Account No. <b>xxxx-xxxx-xxxx-4606</b>  <b>AMAZON</b> <b>ATTN: BANKRUPTCY DEPT</b> <b>PO BOX 965060</b> <b>ORLANDO, FL 32896</b>		<b>W</b>					<b>712.24</b>
Account No. <b>3095</b>  <b>CARE CREDIT</b> <b>BANKRUPTCY DEPT</b> <b>PO BOX 965061</b> <b>ORLANDO, FL 32896</b>		<b>-</b>					<b>11,000.00</b>
Account No. <b>xxxx-xxxx-xxxx-8565</b>  <b>CHASE/SOUTHWEST.COM</b> <b>PO BOX 15298</b> <b>WILMINGTON DE 19886</b>		<b>W</b>					<b>12,413.95</b>
Subtotal (Total of this page)							<b>43,893.43</b>

3 continuation sheets attached

In re **ROBERT GORDON ROY,  
LOUISE MARIE-THERESE VANDE WIELE**

Case No. **2:15-bk-06199**

Debtors  
**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>xxxx-xxxx-xxxx-9925</b>  <b>CITI</b> <b>PO BOX 6500</b> <b>SIOUX FALLS SD 57117</b>		<b>H</b>					<b>2,389.63</b>
Account No. <b>xxxx-xxxx-xxxx-0640</b>  <b>CITI</b> <b>PO BOX 6500</b> <b>SIOUX FALLS SD 57117</b>		<b>W</b>					<b>3,205.35</b>
Account No.  <b>FIRST FREEDOM BANK</b> <b>PO BOX 100</b> <b>LEBANON TN 37087</b>		<b>X J</b>		<b>X</b>			<b>12,000.00</b>
Account No. <b>xxxx-xxxx-xxxx-7669</b>  <b>HOME PROJECTS/WF</b> <b>PO BOX 10475</b> <b>DES MOINES IA 50306</b>		<b>-</b>					<b>8,960.12</b>
Account No.  <b>LASSITER TIDWELL DAVIS</b> <b>150 4TH AVE NO #1850</b> <b>NASHVILLE TN 37219</b>		<b>X J</b>					<b>15,000.00</b>
Sheet no. <b>1</b> of <b>3</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)
							<b>41,555.10</b>



In re **ROBERT GORDON ROY,  
LOUISE MARIE-THERESE VANDE WIELE**

Case No. **2:15-bk-06199**

Debtors  
**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
<b>NAVIENT PO BOX 9635 WILKES BARRE PA 18773</b>		-	<b>NOTICE ONLY</b>			<b>0.00</b>
Account No. <b>xxxxxx0793</b>						
<b>ORKIN C/O ROLLINS ACCEPTANCE PO BOX 660285 DALLAS, TX 75266</b>		J				<b>10,000.00</b>
Account No.						
<b>PAYPAL SMART CONNECT PO BOX 960080 ORLANDO FL 32896</b>		-				<b>1,600.00</b>
Account No. <b>552</b>						
<b>REGIONS BANK PO BOX 2153 DEPT 0150 BIRMINGHAM AL 35287</b>		X J		X	X	<b>5,500.00</b>
Account No.						
<b>THE VOSS LAW FIRM 26619 INTERSTATE 45 N THE WOODLANDS, TX 77380</b>		J		X	X	<b>Unknown</b>
Sheet no. <b>2</b> of <b>3</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						<b>17,100.00</b>



In re **ROBERT GORDON ROY,  
LOUISE MARIE-THERESE VANDE WIELE**

Case No. **2:15-bk-06199**

Debtors  
**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>xxxx-xxxx-xxxx-7646</b>  <b>TRACTOR SUPPLY/CBSD</b> <b>PO BOX 6189</b> <b>SIOUX FALLS SD 57117</b>	<b>X</b>	<b>J</b>		<b>X</b>	<b>X</b>	<b>X</b>	<b>400.00</b>
Account No. <b>xxxx-xxxx-xxxx-3132</b>  <b>WILSON BANK &amp; TRUST</b> <b>623 WEST MAIN ST</b> <b>LEBANON TN 37087</b>				<b>H</b>	<b>DEBTORS HAVE RECEIVED NOTIFICATION THAT THIS DEBT HAS BEEN PAID IN FULL</b>		
Account No.  <b>WILSON BANK &amp; TRUST</b> <b>PO BOX 768</b> <b>LEBANON TN 37088</b>		<b>J</b>		<b>DEBTORS HAVE RECEIVED NOTIFICATION THAT THIS DEBT HAS BEEN PAID IN FULL</b>			<b>0.00</b>
Account No.							
Account No.							
Account No.							

Sheet no. **3** of **3** sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority Claims

Subtotal  
(Total of this page)

**400.00**

Total  
(Report on Summary of Schedules)

**102,948.53**

In re **ROBERT GORDON ROY,  
LOUISE MARIE-THERESE VANDE WIELE**

Case No. 2:15-bk-06199

Debtors

## **SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES**

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☒ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code,  
of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest.  
State whether lease is for nonresidential real property.  
State contract number of any government contract.

In re **ROBERT GORDON ROY,  
LOUISE MARIE-THERESE VANDE WIELE**

Case No. **2:15-bk-06199**

Debtors

## SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
TANGLEWOOD MEDICAL CENTER INC 3075 FALCON RD COOKEVILLE TN 38506	IRS CNTRLZD INSOLVENCY OPRTN PO BOX 7346 PHILADELPHIA, PA 19101-7346
TANGLEWOOD MEDICAL CENTER INC 3075 FALCON RD COOKEVILLE TN 38506	FIRST FREEDOM BANK PO BOX 100 LEBANON TN 37087
TANGLEWOOD MEDICAL CENTER INC 3075 FALCON RD COOKEVILLE TN 38506	RREF II PEBP ACQUISITIONS, INC. C/O PROCHASKA, JOE ESQ 401 CHURCH ST #2600 NASHVILLE, TN 37219
TANGLEWOOD MEDICAL CENTER INC 3075 FALCON RD COOKEVILLE TN 38506	LASSITER TIDWELL DAVIS 150 4TH AVE NO #1850 NASHVILLE TN 37219
TANGLEWOOD MEDICAL CENTER INC 3075 FALCON RD COOKEVILLE TN 38506	TN DEPT REVENUE C/O TN ATTY GEN BK UNIT PO BOX 20207 NASHVILLE, TN 37202
TANGLEWOOD MEDICAL CENTER INC 3075 FALCON RD COOKEVILLE TN 38506	REGIONS BANK PO BOX 2153 DEPT 0150 BIRMINGHAM AL 35287
TANGLEWOOD MEDICAL CENTER INC 3075 FALCON RD COOKEVILLE TN 38506	TRACTOR SUPPLY/CBSO PO BOX 6189 SIOUX FALLS SD 57117

Fill in this information to identify your case:

Debtor 1 ROBERT GORDON ROY

Debtor 2 LOUISE MARIE-THERESE VANDE WIELE  
(Spouse, if filing)

United States Bankruptcy Court for the: MIDDLE DISTRICT OF TENNESSEE

Case number 2:15-bk-06199  
(If known)

Check if this is:

- ☐ An amended filing  
☐ A supplement showing post-petition chapter 13 income as of the following date:

MM / DD / YYYY

## Official Form B 6I

### Schedule I: Your Income

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Occupation

Employer's name

Employer's address

Debtor 1

- ☒ Employed  
☐ Not employed

DOCTOR

1099 EMPLOYEE

Debtor 2 or non-filing spouse

- ☐ Employed  
☒ Not employed

How long employed there? \_\_\_\_\_

#### Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ <u>0.00</u>	\$ <u>0.00</u>
3. Estimate and list monthly overtime pay.	3. +\$ <u>0.00</u>	+\$ <u>0.00</u>
4. Calculate gross income. Add line 2 + line 3.	4. \$ <u>0.00</u>	\$ <u>0.00</u>



	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here	4. \$ 0.00	\$ 0.00
<b>5. List all payroll deductions:</b>		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 0.00	\$ 0.00
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$ 0.00
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ 0.00
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ 0.00
5e. Insurance	5e. \$ 0.00	\$ 0.00
5f. Domestic support obligations	5f. \$ 0.00	\$ 0.00
5g. Union dues	5g. \$ 0.00	\$ 0.00
5h. Other deductions. Specify:	5h.+ \$ 0.00	+ \$ 0.00
<b>6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.</b>	6. \$ 0.00	\$ 0.00
<b>7. Calculate total monthly take-home pay. Subtract line 6 from line 4.</b>	7. \$ 0.00	\$ 0.00
<b>8. List all other income regularly received:</b>		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ 17,250.00	\$ 0.00
8b. Interest and dividends	8b. \$ 0.00	\$ 0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ 0.00	\$ 0.00
8d. Unemployment compensation	8d. \$ 0.00	\$ 0.00
8e. Social Security	8e. \$ 0.00	\$ 0.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f. \$ 0.00	\$ 0.00
8g. Pension or retirement income	8g. \$ 0.00	\$ 0.00
8h. Other monthly income. Specify:	8h.+ \$ 0.00	+ \$ 0.00
<b>9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.</b>	9. \$ 17,250.00	\$ 0.00
<b>10. Calculate monthly income. Add line 7 + line 9.</b> Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 17,250.00 + \$ 0.00 = \$ 17,250.00	
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b> Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify:	11. +\$ 0.00	
<b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the <i>Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data</i> , if it applies	12. \$ 17,250.00	Combined monthly income
<b>13. Do you expect an increase or decrease within the year after you file this form?</b>		
<input type="checkbox"/> No.		
<input checked="" type="checkbox"/> Yes. Explain: <b>DEBTOR HAS BEEN WORKING EXTRA SHIFTS BEYOND WHAT IS REQUIRED UNDER HIS CONTRACT BUT THE DEBTOR DOES NOT BELIEVE THAT IS NOT SUSTAINABLE</b>		

Fill in this information to identify your case:

Debtor 1 ROBERT GORDON ROY

Debtor 2 LOUISE MARIE-THERESE VANDE WIELE  
(Spouse, if filing)

United States Bankruptcy Court for the: MIDDLE DISTRICT OF TENNESSEE

Case number 2:15-bk-06199  
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing post-petition chapter 13 expenses as of the following date:

MM / DD / YYYY

- ☐ A separate filing for Debtor 2 because Debtor 2 maintains a separate household

Official Form B 6J

**Schedule J: Your Expenses**

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Your Household**

1. Is this a joint case?

☐ No. Go to line 2.

☒ Yes. Does Debtor 2 live in a separate household?

☒ No

☐ Yes. Debtor 2 must file a separate Schedule J.

2. Do you have dependents? ☒ No

Do not list Debtor 1 and Debtor 2.

☐ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Do not state the dependents' names.

☐ No

☐ Yes

☐ No

☐ Yes

☐ No

☐ Yes

☐ No

☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents? ☒ No ☐ Yes

**Part 2: Estimate Your Ongoing Monthly Expenses**

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 6I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 0.00

If not included in line 4:

4a. Real estate taxes

4a. \$ 200.00

4b. Property, homeowner's, or renter's insurance

4b. \$ 553.33

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 200.00

4d. Homeowner's association or condominium dues

4d. \$ 0.00

5. Additional mortgage payments for your residence, such as home equity loans

5. \$ 0.00



Debtor 1 **ROBERT GORDON ROY**  
Debtor 2 **LOUISE MARIE-THERESE VANDE WIELE**

Case number (if known) **2:15-bk-06199**

<b>6. Utilities:</b>	
6a. Electricity, heat, natural gas	6a. \$ <u>350.00</u>
6b. Water, sewer, garbage collection	6b. \$ <u>80.00</u>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ <u>567.00</u>
6d. Other. Specify: _____	6d. \$ <u>0.00</u>
<b>7. Food and housekeeping supplies</b>	
7. \$ _____	7. \$ <u>654.00</u>
<b>8. Childcare and children's education costs</b>	
8. \$ _____	8. \$ <u>0.00</u>
<b>9. Clothing, laundry, and dry cleaning</b>	
9. \$ _____	9. \$ <u>162.00</u>
<b>10. Personal care products and services</b>	
10. \$ _____	10. \$ <u>50.00</u>
<b>11. Medical and dental expenses</b>	
11. \$ _____	11. \$ <u>833.33</u>
<b>12. Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	
12. \$ _____	12. \$ <u>500.00</u>
<b>13. Entertainment, clubs, recreation, newspapers, magazines, and books</b>	
13. \$ _____	13. \$ <u>25.00</u>
<b>14. Charitable contributions and religious donations</b>	
14. \$ _____	14. \$ <u>200.00</u>
<b>15. Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a. Life insurance	15a. \$ <u>700.00</u>
15b. Health insurance	15b. \$ <u>2,000.00</u>
15c. Vehicle insurance	15c. \$ <u>100.00</u>
15d. Other insurance. Specify: <u>DISABILITY</u>	15d. \$ <u>880.00</u>
<u>UMBRELLA</u>	\$ <u>3.40</u>
<u>JEWELRY INS</u>	\$ <u>16.59</u>
<b>16. Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: <u>TAXES</u>	
16. \$ _____	16. \$ <u>6,000.00</u>
<b>17. Installment or lease payments:</b>	
17a. Car payments for Vehicle 1	17a. \$ <u>0.00</u>
17b. Car payments for Vehicle 2	17b. \$ <u>0.00</u>
17c. Other. Specify: _____	17c. \$ <u>0.00</u>
17d. Other. Specify: _____	17d. \$ <u>0.00</u>
<b>18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I).</b>	
18. \$ _____	18. \$ <u>0.00</u>
<b>19. Other payments you make to support others who do not live with you.</b>	
19. \$ _____	19. \$ <u>0.00</u>
Specify: _____	
<b>20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>	
20a. Mortgages on other property	20a. \$ <u>0.00</u>
20b. Real estate taxes	20b. \$ <u>0.00</u>
20c. Property, homeowner's, or renter's insurance	20c. \$ <u>0.00</u>
20d. Maintenance, repair, and upkeep expenses	20d. \$ <u>0.00</u>
20e. Homeowner's association or condominium dues	20e. \$ <u>0.00</u>
<b>21. Other: Specify: _____</b>	
21. +\$ _____	21. +\$ <u>0.00</u>
<b>22. Your monthly expenses.</b> Add lines 4 through 21. The result is your monthly expenses.	
22. \$ _____	22. \$ <u>14,074.65</u>
<b>23. Calculate your monthly net income.</b>	
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$ <u>17,250.00</u>
23b. Copy your monthly expenses from line 22 above.	23b. -\$ <u>14,074.65</u>
<b>23c. Subtract your monthly expenses from your monthly income.</b> The result is your <i>monthly net income</i> .	
23c. \$ _____	23c. \$ <u>3,175.35</u>

**24. Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

☒ Yes.

Explain:

JEWELRY INS. INADVERTENTLY USED AN ANNUAL ESTIMATE & DEBTORS CONVERTED TO A MONTHLY AMOUNT. DEBTORS ADVISED BY CPA THAT A MORE ACCURATE ESTIMATE OF ONGOING INCOME TAXES IS \$6,000 PER MONTH. DEBTORS UNDERESTIMATED MONTHLY PROPERTY TAXES, & REAL ESTATE INSURANCE DOUBLED. DEBTORS ALSO UNDERESTIMATED THEIR FOOD & HOUSEHOLD EXPENSES, MEDICAL EXPENSES, CLOTHING, ENTERTAINMENT, & PERSONAL CARE PRODUCTS.

**United States Bankruptcy Court**  
**Middle District of Tennessee**

In re ROBERT GORDON ROY  
LOUISE MARIE-THERESE VANDE WIELE

Debtor(s)

Case No. 2:15-bk-06199

Chapter 11

**DECLARATION CONCERNING DEBTOR'S SCHEDULES**

**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 23 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date December 16, 2015

Signature /s/ ROBERT G. ROY  
ROBERT GORDON ROY  
Debtor

Date December 16, 2015

Signature /s/ LOUISE VANDER WIELE  
LOUISE MARIE-THERESE VANDE WIELE  
Joint Debtor

*Penalty for making a false statement or concealing property:* Fine of up to \$500,000 or imprisonment for up to 5 years or both.  
18 U.S.C. §§ 152 and 3571.



**United States Bankruptcy Court  
Middle District of Tennessee**

In re **ROBERT GORDON ROY  
LOUISE MARIE-THERESE VANDE WIELE**

Debtor(s)

Case No. **2:15-bk-06199**  
Chapter **11**

**STATEMENT OF FINANCIAL AFFAIRS**

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

*DEFINITIONS*

*"In business."* A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

*"Insider."* The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

**1. Income from employment or operation of business**

None ☐ State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT  
\$0.00

SOURCE  
2015: HUSBAND'S 1099 INCOME \$227,920  
2014: HUSBAND'S 1099 INCOME \$226,751  
2013: HUSBAND'S 1099 INCOME \$262,934

**2. Income other than from employment or operation of business**

None ☐ State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

AMOUNT  
\$0.00

## SOURCE

2013: TAXABLE INTEREST \$28

2013: DIVIDENDS \$1,305

2013: CAPITAL GAINS \$15,968

\$0.00

2015: RENTAL INCOME \$4,800

2014: RENTAL INCOME \$7,200

2013: RENTAL INCOME \$3,695

**3. Payments to creditors**

None

*Complete a. or b., as appropriate, and c.*

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
EMBRACE HOME LOANS PO BOX 8066 VIRGINIA BEACH VA 23450	\$1300 PER MONTH	\$3,900.00	\$175,730.00
EMBRACE HOME LOANS PO BOX 8066 VIRGINIA BEACH VA 23450	\$800 PER MONTH	\$2,400.00	\$62,900.00
VOLKSWAGEN CREDIT PO BOX 5215 CAROL STREAM IL 60197	\$560 PER MONTH	\$1,680.00	\$23,984.90
CAPITAL ONE AUTO FIN 7933 PRESTON RD PLANO TX 75024	\$410.95 PER MONTH FOR THREE MONTHS	\$1,232.85	\$21,055.07

None



b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS/ TRANSFERS	AMOUNT PAID OR VALUE OF TRANSFERS	AMOUNT STILL OWING
------------------------------	------------------------------------	--	-----------------------

None



c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATE OF PAYMENT	AMOUNT PAID	AMOUNT STILL OWING
--	-----------------	-------------	-----------------------

\* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.



**4. Suits and administrative proceedings, executions, garnishments and attachments**

None

- ☐ a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT  
AND CASE NUMBER  
**RREF II PEBP ACQUISITIONS, INC. -v-  
TANGLEWOOD MEDICAL CENTER, INC.,  
ROBERT ROY MD & LOUISE VANDER WIESE**

NATURE OF  
PROCEEDING  
**CHANCERY**

COURT OR AGENCY  
AND LOCATION  
**WILLIAMSON CO CHANCERY CT  
135 4TH AVE SO #236  
FRANKLIN, TN 37064**

STATUS OR  
DISPOSITION  
**PENDING**

**DOCKET NO #43063**

None

- ☒ b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE  
BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF  
PROPERTY

**5. Repossessions, foreclosures and returns**

None

- ☒ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF  
CREDITOR OR SELLER

DATE OF REPOSSESSION,  
FORECLOSURE SALE,  
TRANSFER OR RETURN

DESCRIPTION AND VALUE OF  
PROPERTY

**6. Assignments and receiverships**

None

- ☒ a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF  
ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

- ☒ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS  
OF CUSTODIAN

NAME AND LOCATION  
OF COURT  
CASE TITLE & NUMBER

DATE OF  
ORDER

DESCRIPTION AND VALUE OF  
PROPERTY

**7. Gifts**

None

- ☒ List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF  
PERSON OR ORGANIZATION

RELATIONSHIP TO  
DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND  
VALUE OF GIFT



**8. Losses**

- None ☒ List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
--------------------------------------	--	--------------

**9. Payments related to debt counseling or bankruptcy**

- None ☐ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
LEFKOVITZ & LEFKOVITZ 618 CHURCH ST., #410 NASHVILLE, TN 37219	AUGUST 2015	\$3,425.00 FOR ATTORNEY FEES + CC FEE + FILING FEE

**10. Other transfers**

- None ☒ a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
---	------	---

- None ☒ b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE	DATE(S) OF TRANSFER(S)	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY
----------------------------------	---------------------------	---

**11. Closed financial accounts**

- None ☒ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
---------------------------------	--	---------------------------------------

**12. Safe deposit boxes**

None

- ☐ List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY
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**13. Setoffs**

None

- ☐ List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATE OF SETOFF	AMOUNT OF SETOFF
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**14. Property held for another person**

None

- ☐ List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
---------------------------	-----------------------------------	----------------------

**15. Prior address of debtor**

None

- ☐ If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
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**16. Spouses and Former Spouses**

None

- ☐ If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

**17. Environmental Information.**

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

- ☐ a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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6

- None ☐ b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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- None ☐ c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT	DOCKET NUMBER	STATUS OR DISPOSITION
---------------------------------------	---------------	-----------------------

**18. Nature, location and name of business**

- None ☐ a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

*If the debtor is a partnership*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

*If the debtor is a corporation*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

NAME	LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
ROBERT ROY, MD	9402		MEDICAL DOCTOR	

- None ☐ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME	ADDRESS
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The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

**19. Books, records and financial statements**

- None ☐ a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS	DATES SERVICES RENDERED
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- None ☐ b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.



NAME	ADDRESS	DATES SERVICES RENDERED
None <input type="checkbox"/>	c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.	

NAME	ADDRESS
None <input type="checkbox"/>	d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within <b>two years</b> immediately preceding the commencement of this case.

NAME AND ADDRESS	DATE ISSUED
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**20. Inventories**

None <input type="checkbox"/>	a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.
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DATE OF INVENTORY	INVENTORY SUPERVISOR	DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)
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None <input type="checkbox"/>	b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.	
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DATE OF INVENTORY	NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS
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**21. Current Partners, Officers, Directors and Shareholders**

None <input type="checkbox"/>	a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.
----------------------------------	--

NAME AND ADDRESS	NATURE OF INTEREST	PERCENTAGE OF INTEREST
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None <input type="checkbox"/>	b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.	
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NAME AND ADDRESS	TITLE	NATURE AND PERCENTAGE OF STOCK OWNERSHIP
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**22. Former partners, officers, directors and shareholders**

None <input type="checkbox"/>	a. If the debtor is a partnership, list each member who withdrew from the partnership within <b>one year</b> immediately preceding the commencement of this case.
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NAME	ADDRESS	DATE OF WITHDRAWAL
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None <input type="checkbox"/>	b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within <b>one year</b> immediately preceding the commencement of this case.	
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NAME AND ADDRESS	TITLE	DATE OF TERMINATION
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**23. Withdrawals from a partnership or distributions by a corporation**

None <input type="checkbox"/>	If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during <b>one year</b> immediately preceding the commencement of this case.	
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NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR	DATE AND PURPOSE OF WITHDRAWAL	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
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**24. Tax Consolidation Group.**

- None    If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.
- ☐

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

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**25. Pension Funds.**

- None    If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.
- ☐

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

\*\*\*\*\*

**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date December 16, 2015

Signature /s/ ROBERT G. ROY  
ROBERT GORDON ROY  
Debtor

Date December 16, 2015

Signature /s/ LOUISE VANDER WIELE  
LOUISE MARIE-THERESE VANDE WIELE  
Joint Debtor

*Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571*



Fill in this information to identify your case:

Debtor 1 ROBERT GORDON ROY

Debtor 2 LOUISE MARIE-THERESE VANDE WIELE  
(Spouse, if filing)

United States Bankruptcy Court for the: Middle District of Tennessee

Case number 2:15-bk-06199  
(if known)

☐ Check if this is an amended filing

## Official Form 22B

### Chapter 11 Statement of Your Current Monthly Income

12/14

You must file this form if you are an individual and are filing for bankruptcy under Chapter 11. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On top of any additional pages, write your name and case number (if known).

#### Part 1: Calculate Your Average Monthly Income

1. What is your marital and filing status? Check one only.

☐ Not married. Fill out Column A, lines 2-11.

☒ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.

☐ Married and your spouse is NOT filing with you. Fill out Column A, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ 0.00	\$ 0.00
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$ 0.00	\$ 0.00
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$ 0.00	\$ 0.00
5. Net income from operating a business, profession, or farm		
Gross receipts (before all deductions)	\$ 20,123.27	
Ordinary and necessary operating expenses	-\$ 1,077.00	
Net monthly income from a business, profession, or farm	\$ 19,046.27	
	Copy here -> \$ 19,046.27	\$ 0.00
6. Net income from rental and other real property		
Gross receipts (before all deductions)	\$ 0.00	
Ordinary and necessary operating expenses	-\$ 0.00	
Net monthly income from rental or other real property	\$ 0.00	
	Copy here -> \$ 0.00	\$ 0.00

Debtor 1  
Debtor 2

**ROBERT GORDON ROY**  
**LOUISE MARIE-THERESE VANDE WIELE**

Case number (if known)

**2:15-bk-06199**

Column A  
Debtor 1

Column B  
Debtor 2

**7. Interest, dividends, and royalties**

\$ 0.00 \$ 0.00

**8. Unemployment compensation**

\$ 0.00 \$ 0.00

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:

For you \$ 0.00

For your spouse \$ 0.00

**9. Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act.

\$ 0.00 \$ 0.00

**10. Income from all other sources not listed above.** Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total on line 10c.

10a. \_\_\_\_\_ \$ \_\_\_\_\_

10b. \_\_\_\_\_ \$ 0.00

10c. Total amounts from separate pages, if any. + \$ 0.00

\$ \_\_\_\_\_

\$ 0.00

+ \$ 0.00

**11. Calculate your total average monthly income.** Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

\$ 19,046.27

+ \$ 0.00

= \$ 19,046.27

Total current monthly income

**Part 2: Deduct any applicable marital adjustment**

**12. Copy your total average monthly income from Line 11.**

\$ 19,046.27

**13. Calculate the marital adjustment. Check one:**

☐ You are not married. Fill in 0 in line 13d.

☒ You are married and your spouse is filing with you. Fill in 0 in line 13d.

☐ You are married and your spouse is NOT filing with you.

Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.

In lines 13a-c, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.

If this adjustment does not apply, enter 0 on line 13 d.

13a. \_\_\_\_\_ \$ \_\_\_\_\_

13b. \_\_\_\_\_ \$ \_\_\_\_\_

13c. \_\_\_\_\_ + \$ \_\_\_\_\_

13d. Total \_\_\_\_\_ \$ \_\_\_\_\_

Copy here. => 13d. - 0.00

**14. Your current monthly income.** Subtract line 13d from line 12.

14. \$ 19,046.27

Debtor 1  
Debtor 2

ROBERT GORDON ROY  
LOUISE MARIE-THERESE VANDE WIELE

Case number (if known) 2:15-bk-06199

**Part 3:** Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

X /s/ ROBERT G. ROY  
ROBERT GORDON ROY  
Signature of Debtor 1

Date December 16, 2015  
MM / DD / YYYY

X /s/ LOUISE VANDER WIELE  
LOUISE MARIE-THERESE VANDE WIELE  
Signature of Debtor 2

Date December 16, 2015  
MM / DD / YYYY



**Current Monthly Income Details for the Debtor****Debtor Income Details:**Income for the Period **06/01/2015** to **11/30/2015**.**Line 5 - Income from operation of a business, profession, or farm**Source of Income: **1099 EMPLOYEE**

Income/Expense/Net by Month:

	Date	Income	Expense	Net
6 Months Ago:	06/2015	\$21,960.00	\$630.00	\$21,330.00
5 Months Ago:	07/2015	\$21,319.60	\$630.00	\$20,689.60
4 Months Ago:	08/2015	\$15,840.00	\$912.00	\$14,928.00
3 Months Ago:	09/2015	\$18,720.00	\$630.00	\$18,090.00
2 Months Ago:	10/2015	\$20,160.00	\$630.00	\$19,530.00
Last Month:	11/2015	\$19,140.00	\$630.00	\$18,510.00
Average per month:		\$19,523.27	\$677.00	
Average Monthly NET Income:				\$18,846.27

**Line 5 - Income from operation of a business, profession, or farm**Source of Income: **RENTAL INCOME**

Income/Expense/Net by Month:

	Date	Income	Expense	Net
6 Months Ago:	06/2015	\$600.00	\$800.00	\$-200.00
5 Months Ago:	07/2015	\$600.00	\$800.00	\$-200.00
4 Months Ago:	08/2015	\$600.00	\$800.00	\$-200.00
3 Months Ago:	09/2015	\$600.00	\$0.00	\$600.00
2 Months Ago:	10/2015	\$600.00	\$0.00	\$600.00
Last Month:	11/2015	\$600.00	\$0.00	\$600.00
Average per month:		\$600.00	\$400.00	
Average Monthly NET Income:				\$200.00